

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>J.R.</i>	<i>VER</i>	<i>10-18-00</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>J.S.</i>	<i>69134</i>	<i>10-18-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/3/00
2	✓	✓	3/20/01
3	✓	✓	7/18/03
4	✓	✓	3/22/01
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
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13	✓	✓	
14	✓	✓	
15	✓	✓	
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42	✓	✓	
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49	✓	✓	

Claim	Final	Original	Date
50	✓	✓	
51	✓	✓	
52	✓	✓	
53	✓	✓	
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55	✓	✓	
56	✓	✓	
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99	✓	✓	
100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	
102	✓	✓	
103	✓	✓	
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106	✓	✓	
107	✓	✓	
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139	✓	✓	
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141	✓	✓	
142	✓	✓	
143	✓	✓	
144	✓	✓	
145	✓	✓	
146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

(LEFT INSIDE)